# **School Health Order Form**



#### 1. Ship To:

SH Account #	PO#
Name	Title
Company / School Name	
Street Address	
City, State, Zip	
Phone #	Fax #
Email Address	

#### 2. Bill To:

Same as above

Name	Title
Company / School Name	
Street Address	
City, State, Zip	
Phone #	Fax #
Email Address	

#### 3. Order Authorized By:

Name		
Title or Department		

#### 4. Method of Payment

Check	🗌 Bill My Account 🗌 Money Order
Credit Card	School Health Gift Card
VISA	

#### Credit Card Number/Gift Card Number

Name as it appears on card	Expiration Date
Signature (once all other information is fille	ed out, please print out and sign here
Check this box if you would like and special offers.	to receive our e-newsletters
[	

Sales Tax: Customers will be charged applicable taxes, unless proof of tax-exempt status is furnished to School Health. Tax-exempt customers should attach/include a copy of their tax exemption certificate with their order. All Schools Get Instant Credit with Valid Purchase Order: Call our customer care team for details. International orders welcome: Please call, fax or email for shipping and payment information. **Prices:** We reserve the right to change prices due to unforeseen increases or decreases in manufacturer's prices. Catalog prices are current as of January 1, and are subject to change without notification.

Return of Merchandise Guarantee: Call our Customer Care Center to obtain your Return of Merchandise Authorization (RMA) Number. Returns received without an RMA# will not be accepted and no credit shall be issued. Software: Software downloads are considered opened at the time of purchase and may only be replaced with identical software/ media within 30 days if the original purchased software is defective.

Direct-Ship: Merchandise shipped directly from the manufacturer to the customer. Restocking Fee: A restocking fee of 10-20% may be charged for returned goods. The fee(s) will be assessed by the company receiving the merchandise (School Health or a vendor). Damaged on Arrival: Inspect all shipments before accepting. If a package is visibly damaged, refuse to accept until delivery receipt is marked "Received in Damaged Condition." Immediately contact the Customer Care Center at School Health. Claims: Claims for damage should be immediately filed with the transportation company. If concealed damage is discovered upon unpacking, contact the Customer Care Center immediately. Price Matching: School Health is committed to

delivering the best products at the best value. All products are competitively priced and our price matching policy guarantees we will match a price in a competitor's catalog, from the same published year, for identical items/quantities.

Shortages: Shortage, lost, or missing merchandise is our responsibility only after the following precautionary measures have been followed by the customer. (1.) Do not sign delivery ticket unless all packages specified on Bill of Lading are accounted for. If receipt has been signed for total delivery, carriers assume no responsibility. (2.) Check your master Packing Slip. Direct-Ship Items or those on back-order will be delivered separately. (3.) Check all packages marked miscellaneous merchandise carefully. (4.) If summer delivery has been made, check your warehouse carefully.

School Health Corporation makes every effort to depict accurate product descriptions and prices. However, due to changing manufacturing conditions, product color, specifications and prices are subject to change without notice. We reserve the right to correct typographical errors. Due to press variation, actual product color may be slightly different than product colors shown in this catalog.

## **SOURCE CODE**

If shopping from a catalog, please mention the SOURCE CODE to make sure you receive any special offers and promotions!

### 5. Your Order:

<i>≸</i> # Item #	Quantity	Description	Color	Price	Total
					[

Shipping & Handling Information for the Continental U.S.		
Order Value	Applied Charges	
Under \$125	\$12.95	
\$125-\$299	\$19.95	
\$300+	7.0% of sales	

- A \$5.95 service fee, which covers the costs of our warehouse labor and packaging materials, may be added to some orders.
- Oversize items may incur an oversized item fee of \$15 per unit.



HEALTH **SERVICES** 

Online

SchoolHealth.com

**SPECIAL EDUCATION**  **SPORTS** MEDICINE

Phone

Fax

866-323-5465

800-235-1305

Use any of these four convenient ways to order

EARLY CHILDHOOD PHYSICAL **EDUCATION** 

Shipping & Handling

Sales Tax: (CA, FL, IL, NC, IN & SD Only. Attach tax-exempt certificate if applicable.)

Mail

TOTAL

5600 Apollo Drive

**Rolling Meadows, IL 60008**